Available Copy

Effective November 10, 1998

Application or Docket Number

| CLAIMS AS FILED - PART I (Column 1) (Column 2)                                                                                                                                                                                                                            |                                                |                                       |                      |                                             |                  |            | ALL (           | ENTITY                   | OR       | OTHER<br>SMALL      |                        |                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------|----------------------|---------------------------------------------|------------------|------------|-----------------|--------------------------|----------|---------------------|------------------------|----------------|
| FOR                                                                                                                                                                                                                                                                       |                                                | NUMBER FILED                          |                      |                                             | NUMBER EXTRA     |            | TE              | FEE                      | )<br>    | RATE                | FEE                    |                |
| BASIC FEE                                                                                                                                                                                                                                                                 |                                                | r Transport                           |                      |                                             | -                |            | 380.00          | OR                       |          | 760.00              | , ,                    |                |
|                                                                                                                                                                                                                                                                           | AL CLAIMS                                      | 1/4                                   | (/(/ minus 20= + 3.4 |                                             |                  | X\$        | 9=              |                          | OR       | X\$18=              | 4 Za                   | Copy           |
|                                                                                                                                                                                                                                                                           | PENDENT CLAIMS                                 | 7                                     | 7 minus 3 = * (c)    |                                             |                  |            | 9=              |                          | OR       | X78=                | 116811                 | $lpha$         |
| MULTIPLE DEPENDENT CLAIM PRESENT                                                                                                                                                                                                                                          |                                                |                                       |                      |                                             |                  |            |                 |                          |          | +260=               |                        | _              |
| * If the difference in column 1 is less than zero, enter "0" in column 2                                                                                                                                                                                                  |                                                |                                       |                      |                                             |                  |            | 30=<br>TAL      |                          | OR<br>OR | TOTAL               | 1.(-60.0)              | 18             |
| CLAIMS AS AMENDED - PART II                                                                                                                                                                                                                                               |                                                |                                       |                      |                                             |                  |            | IAL             |                          | JOH      | OTHER               |                        | B              |
| (Column 1) (Column 2) (Column 3)                                                                                                                                                                                                                                          |                                                |                                       |                      |                                             |                  |            | SMALL ENTITY OR |                          |          | SMALL ENTITY        |                        |                |
| AMENDMENT A                                                                                                                                                                                                                                                               | 1/14/02 REF                                    | LAIMS<br>MAINING<br>NFTER<br>NDMENT   |                      | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | R/A        | TE              | ADDI-<br>TIONAL<br>FEE   |          | RATE                | ADDI-<br>TIONAL<br>FEE | Available      |
|                                                                                                                                                                                                                                                                           | Total *                                        | 11.1                                  | Minus                | -44                                         | = (1             | X\$        | 9=              |                          | OR       | X\$18=              |                        | DES!           |
|                                                                                                                                                                                                                                                                           | Independent •                                  | <b>(4)</b>                            | Minus                | G                                           | -                | X3         | <b>\$</b>       | $\overline{\mathcal{A}}$ | OR       | X78=                |                        | 5              |
| ٧                                                                                                                                                                                                                                                                         | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                       |                      |                                             |                  |            | 30=             |                          | OR       | +260=               |                        |                |
|                                                                                                                                                                                                                                                                           |                                                |                                       |                      |                                             |                  | L          | OTAL            |                          | OR       | TOTAL               |                        | 1              |
|                                                                                                                                                                                                                                                                           | 01.1-                                          | ADDI1                                 | . FEE                |                                             |                  | ADDIT. FEE |                 | 1                        |          |                     |                        |                |
| _                                                                                                                                                                                                                                                                         |                                                | olumn 1)                              | 2625                 | (Column 2)<br>HIGHEST                       | (Column 3)       |            | _               | ADDI-                    | 1        | ,                   | ADDI-                  | ł              |
| AMENDMENT B                                                                                                                                                                                                                                                               | RE                                             | MAINING<br>AFTER<br>ENDMENT           |                      | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA | R/         | Œ               | TICNAL<br>FEE            |          | RATE                | TIONAL<br>FEE          | 10             |
|                                                                                                                                                                                                                                                                           | Total +                                        | 35                                    | Minus                | 44                                          | =                | _X\$       | 9=              |                          | OR       | X\$18=              |                        | Se .           |
|                                                                                                                                                                                                                                                                           | Independent *                                  | ን                                     | Minus                | 9                                           | -                | X          | 9=              |                          | OR       | X78=                |                        | Se Contraction |
| Ë                                                                                                                                                                                                                                                                         | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                       |                      |                                             |                  |            | 30=             |                          | OR       | +260=               |                        | 8×8            |
|                                                                                                                                                                                                                                                                           |                                                |                                       |                      |                                             |                  |            | OTAL            |                          | OR       | TOTAL<br>ADDIT. FEE |                        | 1 %            |
|                                                                                                                                                                                                                                                                           | 11/15/02 (Column 1) (Column 2) (Column 3)      |                                       |                      |                                             |                  |            | r. FEE          |                          |          | ADDII. 1 CC         |                        | 1              |
| AMENDMENT C                                                                                                                                                                                                                                                               | RE                                             | CLAIMS<br>MAINING<br>AFTER<br>ENDMENT |                      | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | R/         | TE              | ADDI-<br>TIONAL<br>FEE   |          | RATE                | ADDI-<br>TIONAL<br>FEE |                |
|                                                                                                                                                                                                                                                                           | Total •                                        | 3/                                    | Minus                | - 35                                        | = ( )            | \\xs       | 9=              |                          | OR       | X\$18=              |                        |                |
|                                                                                                                                                                                                                                                                           | Independent 1.                                 | . 8                                   | Minus                | *** 7                                       | =                | X          | 39=             |                          | OR       | X78=                |                        |                |
|                                                                                                                                                                                                                                                                           | FIRST PRESENTAT                                | TON OF MI                             | ULTIPLE DEF          | PENDENT CLAIM                               |                  |            | 30=             |                          | 1        | +260=               |                        | 10             |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.                                                                                                                                                                                     |                                                |                                       |                      |                                             |                  |            | OTAL            |                          | OR       | TOTAL               |                        | Æ,             |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20.  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number. |                                                |                                       |                      |                                             |                  |            | r. FEE          |                          |          | ADDIT. FEE          | <u> </u>               | Take<br>CX C   |
|                                                                                                                                                                                                                                                                           | The "Highest Number P                          | reviously Pa                          | id For" (Total o     | r Independent) is the                       | e highest number | tound in   | tne ap          | propriate bo             | ox in co | NUTTUT 1.           |                        |                |
|                                                                                                                                                                                                                                                                           | M PTO-875<br>11/98)                            |                                       |                      |                                             |                  | Patent an  | d Trade         | mark Office. U           | J.S DEI  | PARTMENT C          | F COMMERC              | E %            |

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